Under the Paperwork Reduction Act

Patent and Trad
5, no persons are required to respond to a collection of infor

Office: U.S. DEPARTMENT OF COMMERCE n unless it contains a valid OMB control number

Substitute for form 1449/PTO				Complete if Known		
				Application Number	10/532,576	
INFOR	MATION	N DISCL	OSURE	Filing Date		
STATE	EMENT E	Y APPL	ICANT	First Named Inventor	Holger Richardsen	
				Group Art Unit		
(use as many sheets as necessary)			)	Examiner Name	Not Yet Assigned	
Sheet	1	of	2	Attorney Docket Number	041165-9086-00	

	U.S. PATENT DOCUMENTS							
Examiner Initials		U.S. Patent Document Number	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document				
		·						

	FOREIGN PATENT DOCUMENTS							
Examiner Initials	Country Code	Foreign Patent Document Number	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document	Translation	English Abstract		
/HPY/	DE	197 36 592	Syrinx Diagnostika GmbH	2/25/1999		х		
/HPY/	DE	100 65 561	Bernina Biosystems GmbH	7/11/2002		х		
/HPY/	DE	102 04 053	Bernina Biosystems GmbH	8/14/2003		х		
/HPY/	DE	102 29 438	Bernina Biosystems GmbH (No English Abstract)	1/15/2004				
/HPY	wo	99/10337	Syrinx Diagnostika GmbH	3/4/1999				
			·					

Examiner Signature /Hugh Young/	Date Considered	03/21/2007
---------------------------------	--------------------	------------

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer. Patent and Trademark Office, Washington, DC 0231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box

Alexandria, VA 22313-1450.

PTO/SB/08B

Patent and Trad

Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduct

of 1995, no persons are required to respond to a collection community and a valid OMB number.

Substitute for f	orm 1449B/PTO			Complete if Known		
				Application Number	10/532,576	
INFORMATION DISCLOSURE				Filing Date		
STATEMENT BY APPLICANT			ICANT	First Named Inventor	Holger Richardsen	
				Group Art Unit		
(use as many sheets as necessary)				Examiner Name	Not Yet Assigned	
Sheet	2	of	2	Attorney Docket Number	041165-9086-00	

	OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS
Examiner Initials	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, pages(s), volume-issue numbers(s), publisher, city and/or country where published.
/HPY/	MILLER I.R. ET AL: "THERMOTROPIC PROPERTIES OF BIPOLAR LIPIDS OF SULFOLOBUS-SOLFATARICUS AND OF THEIR MIXTURES WITH DIPALMITOYLPHOSPHATIDYLCHOLINE" Biophysical Chemistry, Vol. 22, no. 1-2, 1985, pgs. 27-35 XP0002276552 & ISSN: 0301-4622, page 31; Figure 4
/HPY/	International Search Report from PCT/EP2003/011758, filed October 23, 2003 (WO 2004/037223)
-	

Examiner   n	V 1	Date	
Signatura / Hugh	Young/	Date	I 02/21/2007
Signature   ''''	1 ourig/	Considered	03/21/2007
3.B		Considered	

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.